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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number 10/678,119
15434-12US
10/678,119

CLAIMS AS FILED - PART I

	(Column 1) NUMBER FILED		(Column 2) NUMBER EXTRA	SMALL ENTITY RATE	SMALL ENTITY FEE	OR	OTHER THAN SMALL ENTITY RATE	OTHER THAN SMALL ENTITY FEE
FOR								
BASIC FEE (37 CFR 1.16(a))					$ 385	OR		$
TOTAL CLAIMS (37 CFR 1.16(c))	36	minus 20 =	* 16	x $ 9 =	144	OR	x $ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3	minus 3 =	* 0	x 0 =	0	OR	x =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			0	+ 0 =	0	OR	+ =	
* If the difference in column 1 is less then zero, enter "0" in column 2				TOTAL	529	OR	TOTAL	0

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	SMALL ENTITY ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	OTHER THAN SMALL ENTITY ADDITIONAL FEE
Total (37 CFR 1.16(c))	* 36	Minus	** 36	= 0	x $ =	0	OR	x $ =	
Independent (37 CFR 1.16(b))	* 3	Minus	*** 0	= 0	x =	0	OR	x =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =	0	OR	+ =	
					TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE	0

AMENDMENT B

	(Column 1) 6/2/05 CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	* 24	Minus	** 36	=	x $ =		OR	x $ =	
Independent (37 CFR 1.16(b))	* 2	Minus	*** 3	=	x =		OR	x =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =		OR	+ =	
					TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE	0

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	=	x $ =		OR	x $ =	
Independent (37 CFR 1.16(b))	*	Minus	***	=	x =		OR	x =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =		OR	+ =	
					TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE	0

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.